

POSITION	ID NO.	DATE
CLASSIFIER		
EXAMINER		
TYPIST		
VERIFIER		
CORPS CORR.		
SPEC. HAND		
FILE MAINT.		
DRAFTING		

INDEX OF CLAIMS

Claim	Date
Final	Original
1	21 10 24 01 06
2	16 21 24 01 06
3	00 30 24 01 06
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25	✓ ✓ ✓ ✓ ✓ ✓
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Claim	Date
Final	Original
51	✓ ✓ ✓ ✓ ✓ ✓
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100	✓ ✓ ✓ ✓ ✓ ✓

SYMBOLS

✓ Rejected

■ Allowed

+ (Through numeral) Canceled

N Non-elected

I Interference

A Appeal

O Objected